

Montana Communicable Disease Weekly Update: 01/22/10



DISEASE INFORMATION

Summary – Weeks 1 & 2 – Ending 01/09/10 and 1/16/10 – Disease reports received at DPHHS during the reporting period – January 3-16, 2010 included the following:

- Vaccine Preventable Diseases: invasive *Streptococcus pneumoniae* (1), Varicella (10)
- Enteric Diseases: Amebiasis (2), Campylobacteriosis (4), Cryptosporidiosis (4), Giardiasis (2), Salmonellosis (8)
- Other Conditions: Hepatitis C, Acute (1)
- Travel Related Conditions: None

NOTE: The report has multiple pages reflecting the following information: (1) vaccine preventable and enteric diseases YTD; (2) other communicable diseases YTD; (3) cases just this week; (4) clusters and outbreaks; and (5) an STD summary.

THE “BUZZ”

Influenza

During weeks 1 & 2 (1/2/10 & 1/16/10), influenza activity continued to decrease in the U.S., with no states reporting widespread activity and 12 states regional activity by 1/16/10.

UPDATE! Activity in Montana – Activity in Montana was lowered to the **SPORADIC** level. There are still cases being reported; however, the number of PCR confirmed cases has dropped significantly. Information on testing can be found at <http://www.dphhs.mt.gov/PHSD/Lab/enviro-lab-index.shtml>. **2009 influenza A (H1N1) continues to predominate - no other subtypes of influenza A are circulating at this time in Montana.**

A MESSAGE FROM THE CDC – NEW! As the 2009-2010 influenza season progresses, we would like to remind public health officials of the importance of detecting changes in influenza activity across the country.

- Testing, including sub-typing of influenza A viruses (i.e., PCR to state) to detect both pandemic and seasonal influenza strains, should continue for all hospitalized and severely ill patients, including patients aged >65 years.
- Timely reporting of all pediatric deaths associated with laboratory-confirmed influenza remains essential to detecting changes in severity of disease among children.
- Continued reporting of ILI cases through ILINet (sentinel providers) will be important to tracking peak influenza activity.
- Health-care providers should continue reporting to local or state health departments any particularly severe or unusual influenza cases or cases among specific vulnerable groups, such as pregnant women, immunocompromised persons, and health-care workers.
- Institutional closings or clusters of influenza infections in prisons, schools, colleges, and long-term care facilities should also be reported through state and local health departments.
- Any adverse reactions to antiviral medications or to influenza vaccines should continue to be reported via the Vaccine Adverse Event Reporting System.

Changes in the geographic spread, type, and severity of circulating influenza viruses will continue to be monitored with updates reported weekly in the online national influenza surveillance summary, FluView.

Even though influenza incidence is decreasing, influenza is unpredictable and there may be increases in disease again. People who have not been vaccinated should get vaccinated now!

Diarrheal Disease and Food Recalls

E. coli 0157:H7 Outbreak and Related Beef Recall - On December 24, 2009, the United States Department of Agriculture's Food Safety and Inspection Service (FSIS) issued a recall notice for 248,000 pounds of beef products from

National Steak and Poultry that may be contaminated with *Escherichia coli* O157:H7 (*E. coli* O157:H7). The recall was issued after FSIS determined there was an association between non-intact steaks (blade tenderized prior to further processing) and illnesses in Colorado, Iowa, Kansas, Michigan, South Dakota and Washington. As of Monday, January 4, 2010, 21 persons from 16 states were reported to be infected with the outbreak strain. Illness onset dates ranged from October 3 through December 14, 2009. ***As of January 22, 2010, no reports of E. coli O157:H7 associated with this recall have been received in MT.*** For more information on this outbreak and the associated product recall, go to: <http://www.cdc.gov/ecoli/2010/index.html>.

Multistate Outbreak of Salmonellosis Associated with Water Frogs – In an MMWR Report published on January 8, 2010, the CDC reported on a national outbreak of *Salmonella typhimurium* associated with water frogs. As of December 30, 2009, there were 85 human isolates with the outbreak strain from 31 states. In a multistate case-control study, exposure to frogs was found to be significantly associated with illness and in 14 cases, there was specific exposure to an exclusively aquatic frog species, the African dwarf frog. This is the first reported multistate outbreak of *Salmonella* infections associated with amphibians. Educational materials aimed at preventing salmonellosis from contact with reptiles should be expanded to include amphibians, such as aquatic frogs. CDC has published guidelines for consumers on how to reduce the risk for *Salmonella* infection from amphibians and reptiles. (<http://www.cdc.gov/salmonella/typh1209/index.html>).

INFORMATION / ANNOUNCEMENTS

NEW! Tuberculosis Testing – The January issue of *Montana Public Health* describes TB cases reported in Montana during the last ten years and TB diagnostic testing available at or through the Montana Public Health Laboratory (MTPHL). It is a particularly good issue to share with clinicians, as it reviews state of the art testing in Montana for tuberculosis. (http://www.dphhs.mt.gov/PHSD/prevention_opps/pdf/MPHJan10.doc)

NEW! PBS Program on H1N1 Influenza Epidemic - The Immunization Action Coalition (IAC) has a copy of the video "Anatomy of a Pandemic", a one hour PBS NewsProgram that discusses the science and policy issues related to the 2009 H1N1 influenza pandemic. Go to go to: <http://www.immunize.org> and click on the image under the words Video of the Week. It may take a few moments for the video to begin playing; please be patient!

IMPORTANT! Communicable Disease Reporting 2009 Reconciliation – CDEpi has begun the process of reconciling 2009 data. Watch for line lists sent via ePASS from Elton Mosher. Please review these line lists to ensure that disease cases that we have match those that are in your records. *Goal is to have this activity completed by March 1, 2010!* Thanks for your assistance!

NEW! STD Case Record Reconciliation — Please send in or FAX all remaining 2009 reportable STD case records (chlamydia, gonorrhea, syphilis) to the STD Program. The deadline for sending the case records is February 15, 2010. If you have questions regarding the case records, please contact Cara Murolo at 444-2678 or cmurolo@mt.gov. The STD case records can be FAXed, 800-616-7460, or sent to: DPHHS STD Program, Cogswell Building, Room C-211, Helena, MT 59620

iLINC on Rash Illnesses – If you missed the iLINC on Rash Illnesses, it was recorded and will be available on the Training and Communication Center (TCC) <https://www.montanapublichealthtcc.org>.

24/7 AVAILABILITY

The Communicable Disease Epidemiology program is available 24 hours a day/7days a week/365 days a year. Please call 406.444.0273 if you need immediate communicable disease epidemiology assistance. The answering service will take a message and we will return the call as quickly as possible.

This newsletter is produced by the Montana Communicable Disease Epidemiology Program. Questions regarding its content should be directed to 406.444.0273 (24/7/365). For more information: <http://cdepi.hhs.mt.gov>.